PTORESON (USACE
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PATENT APPLICATION FEE DETERMINATION RECORD Application or Document of Application or Document or Document of Application or Document or											
Substitute for Form PTO-876									201	639	148
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		. O R	OTHER THAN SMALL ENTITY	
FOR		10000	MUNICIPA RLED		NUMBER EXTRA		BATE	FEE]	RATE	550
BASIC FEE G7 OFR 1.18(ii)									08	BAIL	FER
TOTAL CLAUS G7 CFR L18(s)			ordays 20 ·				21 -		1	-	-
ROSPENDENT CLAMS OF CFR 1.18(s)		MS .			•				OR	× 8	
						┫╽	<u> </u>	ļ	OR	<u> </u>	
MULTIPLE DEPONDENT CLAIM PRESENT (57 CFR 1.16(0))							+=	ļ <u> </u>	OR	•	
* if the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL	<u> </u>	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY OR OTHER THAN										R THAN	
		CLABMS	T	HIGHEST		1		ERITTY)	SMALL	ENTITY
AMENDMENT /	***	REMAINING AFTER AMENDMENT	L	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		. RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	क्ष क्षा १४६०) विकास	12	Minus	20	/		X 6		OR	X	
	propendent (2004.1.140 TQ	3	Minus	- 3	-/	1 [X8•		OR	* .	
₹	PRIST PRESENT	TATION OF MILETIPE	E DEPENO	вталы дта	FR 1.15(d)	11	+1 .		OR.		
						, ,	TOTAL			TOTAL	
6-27-O(59shum 1) (Column 2) (Column 2)							ADO'L FEE		OR	ADD'L FEE	
		(CLARAS		(Column 7) HIGHEST	(Coturan 3)	1 1	-				
ENDMENT B		REMAINING AFTER AMENDMENT		MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Catal Creation	12	Minus	-20		łſ	x •		OR		
Ñ	OF CHR LADO	. 3	Minus .	-3	•	lſ	x s =		OR /	XI.	
¥	FREE PRESENTATION OF MULTIPLE DEPENDENT CLASS (ST CFR 1.18(6))					lt	. /		OR	**	
							YOTAL ADD'L FEE			TOTAL	
6	30/06	(Column 1)		(Column 2)	(Cotumn 3)		wire (OR	ADDL FEE	-
ပ		CLAIMS		HIGHEST) · [· I		
AMENDMENT (REMAINING AFTER AMENDMENT		MUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	to cas risto. Lotal	12	Minos	20	•	ll	× 4=)	OR	Xe_ •	
	Ct. Ct.d 171655	3	Minus	3	•		X 8		OR	×e	
₹	PROFIT PRESENTATION OF MULTIPLE DEPONDENT CLADA GIT OFFI 1,14(40)						+1 -		OR	+1 .	
							TOTAL ADDIL FEE		OR	TOTAL	
* If the entiry in column 1 is less from the entiry in column 2 water TV in entire 2											
" I THE PROPERT RUMBER PROMEUTS PART FOR THE SPACE IN INNER THE TOTAL CONTROL OF THE TOTAL CO											
The Mighest Municar Previously Polici For" (Total or Independent is the highest number tound in the epomprishe box in column 1.											

This editection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to Els [and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 withuits to complete, including generally, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the entered of time you require to complete this form end/or expressions for reducing this bursten, cheald be sent to the Chief information Officer, U.S. Patient and Tradework Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SENO FEES OR COMPLETED FORMS TO THIS ADDRESS. 65H5 TO: Germain storms for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.